

# ULTRASOUND PROTOCOLS



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## Pelvis Non-OB Ultrasound Protocol Guideline

<b>Indication</b>	Pelvic pain, abnormal vaginal bleeding, IUD location
<b>Prep</b>	<p><b>Transabdominal:</b> Full Bladder. Have patient drink 32 oz water, finishing 60 minutes before scan time. Patient is supine</p> <p><b>Transvaginal:</b> Empty Bladder. Patient in lithotomy position. <b>MUST BE PERFORMED ON ABNORMAL UTERINE or POSTMENOPAUSAL BLEEDING PATIENTS</b></p>
<b>Special Instruction</b>	<ul style="list-style-type: none"> <li>• This exam may be performed transabdominally and/or transvaginally. If only transabdominal exam is done, the patient should have a fully distended bladder.</li> <li>• If exam is being performed for abnormal uterine or postmenopausal bleeding a <b>transvaginal exam MUST be performed unless patient refuses or there is contraindication.</b> If no transvaginal exam performed, technologist WILL document the reason within SGRA PACS notes for the Radiologist.</li> <li>• <b>For male sonographers: Do not perform the transvaginal exam without a facility-employed female chaperone in the room.</b></li> </ul>
<b>Procedure</b>	<p><b>Uterus - Longitudinal Grayscale</b></p> <ul style="list-style-type: none"> <li>• Long cervix</li> <li>• Long mid uterus with longitudinal and AP measurement</li> <li>• Long right and left lateral aspects of uterus</li> <li>• Long endometrium with AP measurement in thickest portion</li> </ul> <p><b>Uterus - Transverse Grayscale</b></p> <ul style="list-style-type: none"> <li>• Trans cervix</li> <li>• Trans body with trans measurement</li> <li>• Fundus of uterus</li> </ul> <p><b>Uterus - Color Doppler</b></p> <ul style="list-style-type: none"> <li>• Longitudinal mid uterus</li> <li>• Trans mid uterus</li> </ul> <p><b>Note:</b> Document fibroids with grayscale and color Doppler and measure them. Document any fluid in the cul-de-sac. For post hysterectomy, document midline area in long and trans.</p> <p><b>Ovaries</b></p> <ul style="list-style-type: none"> <li>• Grayscale long and trans with measurements (AP, long, trans) of each ovary</li> <li>• Color and spectral Doppler images of each ovary</li> </ul> <p><b>NOTES:</b></p> <ul style="list-style-type: none"> <li>• Document and measure any ovarian cysts/ masses with grayscale and color Doppler. If ovary is not identified, take images of long and trans adnexa.</li> <li>• Do a brief survey of pelvis for evaluation of free or complex pelvic fluid.</li> <li>• If any uterine, ovarian or adnexal collection, cyst or mass is measured there should be documentation and imaging of the abnormality with color and duplex Doppler imaging.</li> </ul>